

Federal Regulation/State Plan Crosswalk

Federal Regulations or Guidance	Montana State Plan	Purpose
Certification		
1. May limit participation to US citizens, nationals and qualified aliens.	Do not limit; inform local program staff they do not need to check citizenship or immigrations status. Serve eligible participants with proof of residency in service area.	Serve all eligible participants. Immigration documents can be difficult to evaluate whether correct or false.
2. Blood work allowed within 90 days after certification, in certain circumstances.	No allowance for post-certification blood work. We follow USDA and CDC guidance for hematological tests.	Improved quality of service. Unable to add anemia risk factor post certification. Recommended standards by CDC for screening for anemia.
3. At least one nutrition risk must be listed at certification.	All nutrition risks determined at certification must be listed Ensure making appropriate nutrition care plans and referrals.	Improved quality of service. In order to develop a client focused goal and nutrition care plan, all the participant's nutrition risks and supporting data should be known and documented. Computer system does not allow addition of risk codes following certification.
4. While the Federal Regulations refer to high-risk participants, there is not a clear definition of what is a high-risk participant.	Define participants as high-risk due to certain nutrition risk or other nutrition/health behaviors, which may increase the number of nutrition education visits, referrals and follow-up.	Reflective of Nutrition Services Standards definition of high-risk. Nutrition Services Standard 1(E)

Federal Regulations or Guidance	Montana State Plan	Purpose
5. Presumptive eligibility allowed for 60 days to income-eligible pregnant women without determination of nutrition risk.	Full eligibility determination for pregnant women.	Unable to add risk factors post certification. Follow-up at the 60 day point is difficult within the limitations of our current data system.
6. Participant certifications run through the last day of the month when the timeline for the category is reached. For example, for breastfeeding women this is the last day of the month when the infant turns 1 year old.	Participant certifications run through when the timeline for the category is reached. For example, for breastfeeding women this is the day the infant turns 1 year old.	Computer system change required.
7. Nutrition risk criteria are determined at a national level.	Montana has selected not to utilize certain nutritional risk criteria. Regression and head circumference are examples.	Nutrition risk criteria of highest importance are selected.
Benefits		
1. Minimum of quarterly nutrition education offered.	Face to face contact with infants/mother (including weight, length, growth discussion and feeding issues or concerns) monthly for first three months of certification if they enter WIC before 6 months of age.	Improved quality of nutrition services to assess infant growth early on and improved breastfeeding support.
2. Refer high-risk participants to other health-related and social services by providing contact information for the service.	Federal responsibilities as well as referral to on-site or contract Registered Dietitian for defined high-risk nutrition risks, by scheduling an appointment with the RD.	Improved quality of nutrition services. Nutrition Services Standard 1(C)(2) and (E)

Federal Regulations or Guidance	Montana State Plan	Purpose
3. Medical documentation for use of non-contract and exempt infant formulas required. Such documentation may be an original document, a facsimile, or be provided by telephone to the CPA (only when absolutely necessary). Written documentation must be obtained within 1-2 weeks for phone documentation.	In addition to medical documentation for use of non-contract and exempt formulas issuance must be approved by a Registered Dietitian prior to issuance. (local or State). Phoned-in prescriptions are not accepted.	Improved quality of nutrition services. Some cost control over formula issuance without trial of contract formulas. Assurance of medical documentation in file.
Staffing		
1. Provide in-service training and technical assistance for WIC staff who provide direct WIC services and nutrition education. Provide training on the promotion and management of breastfeeding.	Require local program staff (paid, contract or volunteer) to obtain continuing education units appropriate for WIC. The number of credits needed is based on half-time or full-time status.	Improved quality of services. Trained staff provide high-quality nutrition education and accurate information and perform their duties efficiently. Nutrition Services Standard 3
2. Competent Professional Authority (CPA) is the local agency staff person authorized to determine nutritional risk and prescribe supplemental foods. The State agency may authorize the following persons to serve as a CPA: Physicians, nutritionists, home economists with emphasis in nutrition, dietitians, registered nurses, physician's assistants or State or local medically trained health officials.	All CPA's must have a college degree, 12 credits of nutrition coursework appropriate for the WIC population and Anatomy/Physiology coursework. Recent addition of provision for areas having difficulty recruiting and hiring a CPA allows hiring of CPA on a temporary basis - person must meet the Federal definition of CPA and be working towards achieving nutrition coursework standards. The maximum time period allowed for temporary CPA coverage is one year.	Improved quality of services. Increased nutrition knowledge of CPA's to provide high-quality nutrition services. Hiring qualified staff (as defined in the Federal Regulations) has been difficult in some areas of Montana. Expanding the definition of a CPA under the state or locally trained health officials has broadened the pool of qualified CPAs. Other staff have the potential for advancing to another level of duties by meeting the qualifications of a CPA. Nutrition Services Standard 2